Application or Docket Number														
PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003 10 6 50 (24)														
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY				
TC	TAL CLAIMS	1 3	36_				RATE		FEE]	RATE	FEE		
FOR		NUMBER	NUMBER FILED		NUMBER EXTRA		BASIC FEE		375.00	OR	BASIC FEE	750.00		
TOTAL CHARGEABLE CLAIMS		30 mi	30 minus 20=		.10		X\$ 9=			ОЯ	X\$18=	181)		
INDEPENDENT CLAIMS		3 m	3 minus 3 =				X42=			OR	X84=	(AU		
MU	LTIPLE DEPENDENT CLAIM	PRESENT	RESENT							1	.000			
* 15	the difference in column 1	is less than z	less than zero, enter "0" in (+140=			OR	+280=	(41)			
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	AL.		OR	TOTAL	9150		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Col							SMA	LLI	ENTITY	OR	OTHER SMALL			
AMENDMENTA	CLAIMS REMAININ AFTER AMENDME	3	HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NON	Total * 30	Minus	7	0	= 6		X\$ 9=			OR	X\$18=	X\$18=	\bigcirc	
AME	Independent • 2 EIBST_PRESENTATION OF	Minus		3	= 0		X42	=		OR	X84=		• '	
	EBST EBESENIA (IDAG)	MULTIPLE UC	SENDEN	COM		-	+140)=	-	OR	+280=	/	10	
Ι,	(1) W W	•						TAL			TOTAL	 ` 	'\C	
1 6	(Column 1) (Column 2) (Column 3)						ADDIT. I	FEE /]	ADDIT. FEE			
AMENDMENT B	CLAIMS REMAININ AFTER AMENDME	G	HIGH NUM PREVI		PRESENT EXTRA		RAT	Έ	ADØI- TIØNAL FEE		RATE	ADDI- TIONAL FEE	12/	
Ş	Total •	Minus	1.0		=		X\$ 9)=/		OF/	X\$18=			
	Independent +	pendent + Minus ST PRESENTATION OF MULTIPLE DEPI			7		X42/	#/		V R	X84=		1	
-	FIRST PRESENTATION OF	. MULTIPLE DE	PENDEN	CLAIM		j	+140)=		OR	+280=	//		
			• 0 0				TO	TAL		OR	TOTAL		ľ	
	(Column		Colu	ma 21	(Column 3)		ADDIT.	FEE	L	10.,	ADDIT. FEE			
	CLAIMS HIGHEST								ADDI-	1	(H)	ADDI-	ł	
AMENDMENT C	REMAININ AFTER AMENDME		PREVI	IBER OUSLY FOR	PRESENT		RAT	E	TIONAL FEE		RATE	TIONAL		
Į	Total +	Minus	**		8		X\$ 9	=		OR	X\$18=		1	
AME	Independent +	Minus	***	7.01.411	<u> -</u>		X42	=	·	OR	· X84=		1	
L	FIRST PRESENTATION O	- MULTIPLE DI	EPENDEN	T CLAIM		1	1100			1	+280=		1	
	If the entry in column 1 is less th						+140	TAL		OR	TOTAL	 	1	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **ODIT. FEE											1			
Į.	The "Highest Number Previous	y Paid For (Total	or Independ	dent) is th	e highest numb	er fo	und in th	ю ар	propriate bo	x In c	otumn 1.		1	

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